FORM D UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 RECLIVED FORM D NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR**

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OMB APP	ROVAL
OMB Number:	3235-0076
Expires:	April 30, 2008
Estimated average	
burden hours per res	sponse: 16.00

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Prefix	Serial
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<u> </u>
Name of Offering (☐ check if this is an amendment and name has changed, and indicate change.) Inmar Holdings: Options
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☑ Rule 506 ☐ Section 4(6) ☐ ULOE
Type of Filing: New Filing Amendment
A. BASIC IDENTIFICATION DATA
1. Enter the information requested about the issuer
Name of Issuer (☐ check if this is an amendment and name has changed, and indicate change.)
Inmar Holdings, Inc.
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (incl. Area Code)
c/o New Mountain Capital, LLC, 787 Seventh Ave., 49 th Fl., New York, NY 10019 (212) 720-0300
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Incl. Area Code)
(if different from Executive Offices)
Brief Description of Business
Through its subsidiary, Inmar, Inc., the issuer is a leading business process outsourcing company
Type of Business Organization
☐ corporation ☐ limited partnership, already formed ☐ other (please specify ☐ limited partnership, to be formed ☐ other (please specify ☐ 1 200)
□ business trust □ limited partnership, to be formed 2007
Month Year THOMAS
Actual or Estimated Date of Incorporation or Organization: 0 2 0 7 Actual
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for
State: CN for Canada; FN for other foreign jurisdiction) D E
GENERAL INSTRUCTIONS

UNIFORM LIMITED OFFERING EXEMPTION

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File. U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
* Each promoter of the issuer, if the issuer has been organized within the past five years;
* Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
* Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
* Each general and managing partner of partnership issuers.
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or
Full Name (Last name first, if individual) Managing Partner
New Mountain Partners II, L.P.
Business or Residence Address (Number and Street, City, State, Zip Code)
787 Seventh Ave., 49 th Floor, New York, NY 10019
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)
Klinsky, Steven B.
Business or Residence Address (Number and Street, City, State, Zip Code)
C/o New Mountain Capital, LLC, 787 Seventh Avenue, 49 th Floor, New York, NY 10019 Check Box(es) that Apply: □ Promoter □ Beneficial Owner ☑ Executive Officer □ Director □ General and/or
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)
Londal, Douglas F.
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o New Mountain Capital, LLC, 787 Seventh Avenue, 49 th Floor, New York, NY 10019
Check Box(es) that Apply:
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

				B. IN	FORMAT	ION ABO	OUT OFF	ERING				
								ec			Yes	No
I. Has the	e issuer sole	l, or does th	ne issuer inte							***************************************		₩
•					in Append		-	inder ULUI	3.			
What i نب 2.	s the minim	um investn	nent that wil	l be accepte	ed from any	individual?)				\$	I/A
3. Does to	he offering	permit join	t ownership	of a single	unit?						Yes □	No ☑
commi If a per or state	ssion or sin rson to be li es, list the n	nilar remun sted is an a ame of the	sted for each eration for s ssociated poly broker or do et forth the i	solicitation erson or ago ealer. If mo	of purchase ent of a brok ore than five	ers in connector or dealer ter or dealer te (5) person	ction with s registered s to be liste	ales of secu with the SE	rities in the C and/or wi	offering. th a state		
Full Name	(Last name	first, if ind	lividual)				·					
None												
	r Residence	Address (Number and	Street, Cit	y, State, Zip	Code)						
Name of A	ssociated E	roker or D	ealer								•	
			s Solicited				 			<u> </u>		
(Check ".	All States"	or check inc	dividual Sta	tes)		***************************************					🗆 A	.ll States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
1 an i tame	(Lust num	moi, n me	,									
Business c	r Residence	e Address (Number and	Street, Cit	y, State, Zip	Code)						· · · · · · · · · · · · · · · · · · ·
Name of A	Associated E	Broker or D	ealer							· · · -		
			as Solicited dividual Sta								П А	ll States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	 (HI)	[ID]
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[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name	first, if inc	lividual)									
Business o	r Residence	e Address (1	Number and	Street, Cit	y, State, Zip	Code)						
Name of A	Associated F	Broker or D	ealer				·					
States in V	Vhich Perso	n Listed Ha	as Solicited	or Intends t	o Solicit Pu	ırchasers			 :			
(Check ".	All States"	or check ind	dividual Sta				***************************************	•••••		***************************************		All States
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[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA] [PR]
ומז	[SC]	[CD]	ITNI	[TX1	HIT	(VT)	[VA]	[WA]	[WV]	rwn	(WY)	HPK!

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security		Aggregate Offering Price		An	nount Already Sold
	Debt	\$	0	\$		0
	Equity		O	\$		0
	□ Common □ Preferred					,
	Convertible Securities (including warrants)	\$	8,529,500	. \$	8	3,529,500
	Partnership Interests	\$_	0	\$		0
	Other (Specify	\$_	0	\$		0
	Total	\$_	8,529,500	\$	8	3,529,500
	Answer also in Appendix, Column 3, if filing under ULOE.			•	-	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."					
			Number Investors		Do	Aggregate ollar Amount f Purchases
	Accredited Investors	_	14	. \$	8	3,529,500
	Non-accredited Investors	_	0	. \$		0
	Total (for filings under Rule 504 only)	_	N/A	\$		N/A
	Answer also in Appendix, Column 4, if filing under ULOE.					
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.					
	Type of offering		Type of Security		De	ollar Amount Sold
	Rule 505		N/A	\$		N/A
	Regulation A		N/A	\$		N/A
	Rule 504		N/A	·		N/A
	Total	-	N/A	\$		N/A
th th	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.			•		
	Transfer Agent's Fees			\$		
	Printing and Engraving Costs		0	\$		
	Legal Fees		Ø	\$		40,000
	Accounting Fees			\$		
	Engineering Fees			\$		
	Sales Commissions (specify finders' fees separately)			\$		
	Other Expenses (identify)			\$		
	Total*		Ø	\$		40,000

C. OFFERING PR	RICE, NUMBER OF INVESTORS, EX	(PENS	SES A	AND USE OF P	ROCE	EDS
- Question 1 and total expenses fu	e aggregate offering price given in response urnished in response to Part C - Question 4 peeds to the issuer."	a. Thi	is		\$_	8,489,500
to be used for each of the purposes furnish an estimate and check the	djusted gross proceeds to the issuer used or shown. If the amount for any purpose is no e box to the left of the estimate. The tot usted gross proceeds to the issuer set forth in	ot knowr al of th	n, ne			
				Payments to Officers, Directors, & Affiliates		Payments To Others
Salaries and Fees		🗆	\$_		_ 🗆	\$
Purchase of real estate		🗆	\$_		_ 🗆	\$
Purchase, rental or leasing and insta	allation of machinery and equipment	🛘	\$_		_ 🗆	\$
Construction or leasing of plant buil	ldings and facilities	🗖	\$_		_ 🗆	\$
this offering that may be used in	cluding the value of securities involved in exchange for the assets or securities of		\$_			\$
Repayment of indebtedness		🗖	\$			\$
			\$	8,489,500		\$
			_			
			\$			\$
		_	\$_	8,489,500	_ 🗆	\$
Total Payments Listed (column total	ls added)			☑ \$	8,48	9,500
	D. FEDERAL SIGNAT	URE				
following signature constitutes an under	e to be signed by the undersigned duly aut lertaking by the issuer to furnish to the U.S. by the issuer to any non-accredited investor pu	Securiti	ies an	nd Exchange Comi	mission,	upon written reques
ssuer (Print or Type)	Signature			Date		
nmar Holdings, Inc.	log -			December	7_	<u>,</u> 2007
Name of Signer (Print or Type)	Title of Signer (Print or Type)					_
Douglas F. Londal	Vice President and Secreta	rv				

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

